



LOS ANGELES COUNTY COMMISSION ON HIV

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While not required of meeting participants, signing-in constitutes public notice of attendance. Presence at meetings is recorded solely based on sign-in sheets, and not signing-in constitutes absence for Commission members. Only members of the Commission on HIV are accorded voting privileges, thus Commissioners who have not signed in cannot vote. Sign-in sheets are available upon request.

STANDARDS OF CARE COMMITTEE MEETING MINUTES September 4, 2008

Approved
12/4/08

MEMBERS PRESENT	MEMBERS ABSENT	PUBLIC	HIV EPI AND OAPP STAFF	COMM STAFF/ CONSULTANTS
Angelica Palmeros, <i>Co-Chair</i>	Sharon Chamberlain	Miki Jackson	Angela Boger	Jane Nachazel
Fariba Younai, <i>Co-Chair</i>	Mark Davis	Jenny O'Malley	Lanet Williams	Glenda Pinney
Maxine Franklin		Dean Page		Doris Reed
David Giugni				Craig Vincent-Jones
Terry Goddard				
Brad Land				
Everardo Orozco				

CONTENTS OF COMMITTEE PACKET

- 1) **Agenda:** Standards of Care Committee Agenda, 9/4/2008
- 2) **Letter:** Public Comment on Language Services Standards of Care, PALS for Health, 9/2/2008
- 3) **Policy/Procedure:** HIV Continuum of Care Grievance Process, 9/3/2008

1. **CALL TO ORDER:** Ms. Palmeros called the meeting to order at 9:25 am.
2. **APPROVAL OF AGENDA:**
MOTION #1: Approve the Agenda Order (*Passed by Consensus*).
3. **APPROVAL OF MEETING MINUTES:**
MOTION #2: Approve Standards of Care Committee meeting minutes (*Postponed*).
4. **PUBLIC COMMENT, NON-AGENDIZED:** There were no comments.
5. **COMMISSION COMMENT, NON-AGENDIZED:** There were no comments.
6. **PUBLIC/COMMISSION COMMENT FOLLOW-UP:** Mr. Vincent-Jones announced that the 9/11/08 Commission meeting was cancelled; the Commission's annual meeting would be 11/13/08 (site yet to be determined); and that Ms. O'Malley's application for membership on the SOC Committee had been approved by the Board on 9/2/08.
7. **CO-CHAIRS' REPORT:** There was no co-chairs' report.
8. **MEDICAL CARE COORDINATION (MCC):**
 - Mr. Vincent-Jones discussed the recent Health Resources Services Administration (HRSA) All-Grantees Meeting in Washington DC, reporting that approximately a third of the workshops focused on medical care coordination (MCC). Although several jurisdictions are working on MCC, the Commission was more advanced than most. In addition, two other jurisdictions (Oregon and Phoenix, Arizona) have developed transitional policies and are ready to launch pilot programs.
 - Mr. Vincent-Jones noted that some jurisdictions had attempted to slide Psychosocial Case Management into Medical Case Management. Because they were essentially changing the name and nothing more, HRSA was possibly going to take action against those jurisdictions.

- Regarding the financial simulation model, letters to providers requesting further data concerning acuity levels were being sent.

9. STANDARDS OF CARE:

A. Hospice Services: The standard will be presented at the 10/9/08 Commission meeting for final approval.

B. Language Services:

- Public comment received from PALS for Health addressed allocation and contractual issues outside the purview of the Commission. OAPP staff agreed to review the Language Standard to determine if it is being enforced properly and if the general staffing requirements pertaining to training is adequate.
- Training, other than that in the **General Staffing Requirements** section was to have been removed from the standard prior to release for public comment, however because it was not, the standard will be re-released for public comment at the 10/9/08 Commission meeting.
- ➡ OAPP to review the Language Services standard to determine if it is being enforced properly and if requirements pertaining to staff is adequate and, report to the SOC Committee on 10/2/08.

C. Case Management, Home-Based:

- Mr. Vincent-Jones reported that the new standard was reviewed with SOC Committee members, OAPP staff, and state representatives (by phone) and found not to need revision because the current standard is in synch with both the state and OAPP's policies reflecting the spectrum of management and services. .
- The name was the one item questioned. Mr. Vincent-Jones noted the standard included home health care and attendant care, not just case management, though those direct services had not been funded to date.
- Ms. Franklin recommended keeping the name because the state also used it. The state service model uses a social worker and nurse working together to assess whether a patient requires attendant care or a homemaker. Ms. O'Malley noted that Medical Waiver services were all inclusive down to food vouchers and grab bars.
- The Committee agreed to retain the name as is, to remain consistent with the state and OAPP.

D. Miscellaneous:

- Ms. Boger asked about protocol regarding reconciling a particular service with the related standard of care. Mr. Vincent-Jones responded that the Office of AIDS Programs and Policy (OAPP) should send a letter to the SOC Committee who would then determine whether the service needed to be revised to meet the standard or vice versa. He reiterated that it is the standard that dictates the services, not the other way around.
- Mr. Vincent-Jones added that a policy for ongoing standard revisions would be developed after the complete set of standards was done.

10. GRIEVANCE POLICIES AND PROCEDURES:

- The Committee reviewed the draft outline of the Grievance Policy and Procedure which when completed and approved by the Commission, has to be approved by the Board then sent to HRSA. Mr. Vincent-Jones reported that the work group had extensively reviewed the initial draft and revised it as presented to the Committee.
- Consumer information will be provided in a brochure once the administrative part is in place and will be available in both English and Spanish. While providers are already required to ensure new patients receive grievance information, materials are not standard and are often not consumer friendly.
- Consumers who feel intimidated (by the provider) can contact OAPP's Warm Line instead of filing a grievance with the provider.
- The Warm Line is active from 8:00 am to 5:30 pm. Spanish-speaking employees are available plus the County interpreter service for callbacks in any language. However, the (800) 260-8787 outgoing message is in English only. Mr. Vincent-Jones recommended adding Spanish to the Warm Line's outgoing message since the system of care requires English and Spanish availability.
- Because there is also a Warm Line connected to the HIV LA Resource Directory, discussion ensued about the feasibility of OAPP changing the name of its Warm Line to something like "Grievance Line" to lessen consumer confusion. OAPP staff in attendance will carry the discussion back to Ms. Orticke who supervises OAPP's Quality Management including the Warm Line.

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- Mr. Vincent-Jones stated that the Commission had previously noted to APLA that there appeared to be confusion about their use of “warm line,” but agreed to call consumer feedback to their attention more formally. APLA had not been aware of the OAPP Warm Line, but have already agreed to include it in the next HIV LA Resource Directory.
- Mr. Vincent-Jones noted there were two levels of grievance in the system of care: consumer grievances about direct provision of care, and grievances from consumers or others to the Commission about system level failures like services inconsistent with the Standards of Care or voted allocations.
- Although the policy does not cover other grievances like those on allocations, the Standards of Care, personnel, or Commissioner to Commissioner, it will reference other policies where they exist and identify areas where policies are not yet completed.
- Mr. Land asked about the process if OAPP has not helped consumers access care in 30 days after an agency closes. Mr. Vincent-Jones responded that consumers must request help to initiate OAPP procedures. He felt that both professional standards and personal values would prompt a satisfactory response. If needed, next steps would be mediation and arbitration, followed by direct appeal to the Board. The County has an Ombudsman Office to help
- Ms. Williams noted that OAPP’s Clinical Services Division has a team of nurses and a physician to ensure patient care. Unresolved medical complaints go to the Medical Director and non-medical ones to the Executive Director. Anonymous reports are accepted, but people are advised that makes investigation harder and the agency might deduce someone’s identity. The goal is to resolve a grievance within 30 days, but that is not always possible and OAPP action is limited to contract terms, e.g., it cannot fire someone. It was noted that some procedures might have changed since Mary Orticke assumed responsibility.
- Ms. O’Malley noted that Medi-Cal Waiver clients also had the right to a “fair hearing,” but added that any process needed to clearly identify the end point of an appeal since some individuals could not be satisfied.
- Dr. Younai reported that grievances were discussed several years ago pertaining to service effectiveness. It was deferred while the Standards of Care were completed.
- Ms. O’Malley suggested that the policy’s purpose be expanded to include that there will be “due diligence” in resolving grievances within the bodies’ scopes and that appropriate referrals would be made when such resolutions were not possible.
- Ms. Williams said that OAPP has a grievance policy and will relay the request that a copy be sent to the SOC Committee to Ms. Orticke.
- Mr. Vincent-Jones reported work had been re-started on the quarterly aggregate report which will address **Reporting and Documenting**. In addition, Ms. Franklin added there was a recent meeting at OAPP regarding the subject.
- Mr. Vincent-Jones stated that once the draft policy is completed, it will be sent to OAPP and County Counsel for review before final approval by the SOC Committee.
- ➡ Ms. Boger agreed to follow-up with OAPP to develop a more descriptive name for the OAPP grievance Warm Line to distinguish it from the HIV LA Resource Directory referral Warm Line and to identify its purpose.
- ➡ Ms. Williams will relay the request to Ms. Orticke that a copy of OAPP’s grievance policy be sent to Mr. Vincent-Jones.

11. **MEDICAL OUTPATIENT RATE STUDY:** Mr. Land suggested that OAPP present any concerns to the SOC Committee regarding the medical outpatient rate study to the Commission presentation. Mr. Vincent-Jones replied that he would advise Dr. Green of the request although the Rate Study was not within the Commission’s purview and that the ultimate decision on how to proceed was up to OAPP.

12. **AETC REPORT:** There was no report.

13. **COMMITTEE WORKPLAN UPDATE:**

- Mr. Vincent-Jones reported that a copy editor would be hired within in the next few days to begin work on the Standards of Care publication, inclusive of writing the consumer brochures.
- Solicitation for the graphic designer is the next phase.
- Publication of the standards is planned for December 2008 but, as a living document, updates and additions like special populations will be released electronically as developed.

14. **NEXT STEPS:** There was no report.

15. **ANNOUNCEMENTS:** It was confirmed that all consumers were welcome at “Meet the Grantee” Caucus meetings. Official caretakers, defined as those for minors or people in hospice, may also attend.

16. **ADJOURNMENT:** The meeting was adjourned at 11:05 am.